

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing	Attorney Docket No.	2444-107
	First Named Inventor	Esther H. CHANG
	COMPLETE IF KNOWN	
	Application Number	PCT/US99/27365
	Filing Date	November 19, 1999
	Group Art Unit	To Be Assigned
	Examiner Name	To Be Assigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: SYSTEMIC VIRAL/LIGAND GENE DELIVERY SYSTEM AND GENE THERAPY the specification of which was filed on 19 November 1999 as United States Application Number or PCT International Application Number PCT/US99/27365 and was amended on 17 November 2000.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

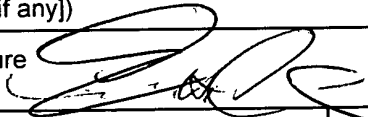
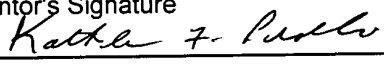
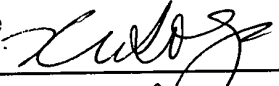
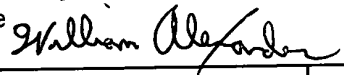
Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/109,236	November 19, 1998
60/128,330	April 8, 1999

I or we hereby appoint the registered practitioner(s) associated with Customer No. 6449 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to Customer Number 6449.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: <u>Esther H.</u> (first and middle [if any])		Family Name: <u>CHANG</u> or Surname	
Inventor's Signature 		Date <u>5/16/01</u>	
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Mailing Address: 7508 Vale Street			
Mailing Address			
City: Chevy Chase		State: MD	Zip: 20815 Country: U.S.A.
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: <u>Kathleen F.</u> (first and middle [if any])		Family Name: <u>PIROLLO</u> or Surname	
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Given Name: <u>Liang</u> (first and middle [if any])		Family Name: <u>XU</u> or Surname	
Inventor's Signature 		Date <u>5/16/01</u>	
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City: Arlington		State: VA	Zip: 22209 Country: U.S.A.
<b>NAME OF FOURTH INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: <u>William</u> (first and middle [if any])		Family Name: <u>ALEXANDER</u> or Surname	
Inventor's Signature 		Date <u>5/17/01</u>	
Residence: City: <u>Rockville</u> <u>MD</u> State: MD		Country: U.S.A. Citizenship: U.S.A.	
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Mailing Address			
City: Rockville		State: MD	Zip: 20853 Country: U.S.A.